



Bib Data-Sheet



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SERIAL NUMBER 09/509,051	FILING DATE 06/08/2000 RULE -	CLASS 422	GROUP ART UNIT 1743 1641	ATTORNEY DOCKET NO. 514485-3810
APPLICANTS CHRISTIAN MICULKA, WIEN, AUSTRIA; NORBERT WINDHAB, HATTERSHEIM, GERMANY; HANS-ULRICH HOPPE, LANGENBACH, GERMANY;				
** CONTINUING DATA ***** THIS APPLICATION IS A 371 OF PCT/EP98/06001 09/21/1998 <i>RP</i>				
** FOREIGN APPLICATIONS ***** GERMANY 19741716.7 09/22/1997 <i>RP</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/21/2000				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>RP</i> Allowance Examiner's Signature _____ Initials _____		STATE OR COUNTRY AUSTRIA	SHEETS DRAWING 10	TOTAL CLAIMS 32
INDEPENDENT CLAIMS 1				
ADDRESS WILLIAM F LAWRENCE FROMMER LAWRENCE & HAUG 745 FIFTH AVENUE NEW YORK ,NY 10151				
TITLE ADDRESSABLE MODULAR RECOGNITION SYSTEM, PRODUCTION MODE AND USE				
FILING FEE RECEIVED 1186	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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CONFIRMATION NO. 7608

SERIAL NUMBER 09/509,051	FILING DATE 06/08/2000 RULE	CLASS 435	GROUP ART UNIT 1641	ATTORNEY DOCKET NO. 514485-3810
APPLICANTS CHRISTIAN MICULKA, WIEN, AUSTRIA; NORBERT WINDHAB, HATTERSHEIM, GERMANY; HANS-ULRICH HOPPE, LANGENBACH, GERMANY;				
** CONTINUING DATA ***** This application is a 371 of PCT/EP98/06001 09/21/1998				
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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged		STATE OR COUNTRY AUSTRIA	SHEETS DRAWING 10	TOTAL CLAIMS 32
Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 1		
ADDRESS 34263				
TITLE ADDRESSABLE MODULAR RECOGNITION SYSTEM, PRODUCTION MODE AND USE				
FILING FEE RECEIVED 1684	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	